



LIMITS ON CLIENT CONFIDENTIALITY

As your therapist, I am required to disclose confidential information if any of the following conditions exist:

- 1. You are a danger to yourself or others.
2. You seek treatment to avoid detection or apprehension or enable anyone to commit a crime.
3. Your therapist was appointed by the courts to evaluate you.
4. The contact is one in which your psychotherapist must file a report to a public employer or as to information required to be recorded in a public office, if such report or record is open to public inspection.
5. You are under the age of 16 years and are the victim of a crime.
6. You are a minor and your psychotherapist reasonably suspects you are the victim of child abuse, or neglect.
7. You are a person over the age of 65 and your psychotherapist believes you are the victim of physical abuse. Your therapist may disclose information if you are the victim of emotional abuse.
10. You die and the communication is important to decide an issue concerning a deed or conveyance, will or other writing executed by you affecting an interest in property.
11. You file suit against your therapist for breach of duty or your therapist files suit against you.
12. You have filed suit against anyone and have claimed mental/emotional damages as part of the suit.
13. You waive your rights to privilege or give consent to limited disclosure by your therapist.
14. Your insurance company paying for services has the right to review all records.

The policy of this practice is to follow the guidelines of the DBT "consultation to the patient" rule.

*If you have any questions about these limitations, please discuss them with me.

Signature: _____ Date: _____

Parent/Guardian:

Signature: _____ Date: _____

Witness: _____ Date: _____